

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVS4373AGC</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/06/2009</b>
NAME OF PROVIDER OR SUPPLIER <b>HERITAGE PARK GROUP HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1286 MOUND HOUSE STREET LAS VEGAS, NV 89110</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p><b>Initial Comments</b></p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted at your facility on August 6, 2009. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility was licensed for six Residential Facility for Group beds for elderly and disabled person and/or persons with mental illness. The census at the time of the survey was four. Four resident files were reviewed and three employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of A.</p> <p>There were no complaints investigated.</p> <p>The following deficiencies were identified:</p>	Y 000	<p><i>DOC Accepted by B. Kent 8/13/09</i></p>	
Y 105 SS=D	<p><b>449.200(1)(f) Personnel File - Background Check</b></p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.</p> <p>This RULE: is not met as evidenced by:</p>	Y 105	<p><i>Y105</i></p> <p><i>A. Employee # 3 has sent new fingerprints for FBI and State background check. See attachment #1.</i></p>	

If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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*Luz B. Requino* Adm. *8/13/09*

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Y 105	Continued From Page 1  Based on record review on 8/6/09, the facility failed to ensure 1 of 3 caregivers met background check requirements (Employee #3 - No documentation of response from FBI).  Severity: 2 Scope: 1	Y 105	B. Files of employees will be checked every month to ensure that all background checks are done. The administrator will monitor for compliance.  C. 8/13/09	
Y 451 SS=F	449.231(2)(a)-(f) First Aid Kit  NAC 449.231 2. A first-aid kit must be available at the facility. The first-aid kit must include, without limitation: (a) A germicide safe for use by humans. (b) Sterile gauze pads; (c) Adhesive bandages, rolls of gauze and adhesive tape; (d) Disposable gloves; (e) A shield or mask to be used by a person who is administering cardiopulmonary resuscitation; and (f) A thermometer or device that may be used to determine the bodily temperature of a person.  This RULE: is not met as evidenced by: Based on observation on 8/6/09, the facility failed to have a first aid kit available with the required components (no CPR mask/shield).  Severity: 2 Scope: 3	Y 451	Y 451  A. A first aid kit has been purchased for the facility and it contains the required CPR mask shield. See Attach #2.  B. We will inspect first aid kits every month to ensure that we have all	

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Y 620	Continued From Page 2	Y 620	<p><i>the required compo- nents. The adminis- trator will monitor for compliance. C. 8/13/09</i></p> <p><i>Y 620</i></p> <p><i>A. Employee #2 had faxed a request to the Bureau to obtain a bedfast/hospice resi- dent. If the request is denied we will be willing to trans- fer resident #1 to a qualified facility.</i></p> <p><i>B. We will be very careful to admit residents in the future. We will consult a physician</i></p>	
Y 620 SS=D	<p>449.2702(4)(a) Admission Policy</p> <p>NAC 449.2702 4. Except as otherwise provided in NAC 449.275 and 449.2754, a residential facility shall not admit or allow to remain in the facility any person who: (a) Is bedfast.</p> <p>This RULE: is not met as evidenced by: Based on record review and interview on 8/6/09, the facility failed to ensure bedfast residents were not admitted to the facility for 1 of 4 sampled residents.</p> <p>Findings include:</p> <p>Resident #1 was admitted to the facility on 5/5/09 with diagnoses of renal failure urinary tract infection and history of fracture hip. Resident #1 was bedfast and on hospice.</p> <p>Interview with Employee #2 on 8/6/09 at 12:45PM indicated that Resident #1 was bedfast prior to admission. Employee #2 further indicated that he was unaware that he could not admit a resident that was bedfast. On 6/8/09 Employee #2 faxed a request to the Bureau to obtain a bedfast/hospice resident.</p> <p>Severity: 2                  Scope: 1</p>	Y 620		
Y 698 SS=D	<p>Residents Requiring use of Oxygen-Storage</p> <p>2. The caregivers employed by a residential</p>	Y 698		

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SURVEY OF COMPLIANCE WITH DEFICIENCY  
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Y 698	<p>Continued From Page 3</p> <p>facility with a resident who requires the use of oxygen shall:</p> <p>(b) ensure that:</p> <p>(5) All oxygen tanks kept in the facility are secured in a stand or to a wall;</p> <p>This Requirement is not met as evidenced by: Based on observation on 8/6/09, the facility did not ensure oxygen tanks were secured in a rack or to the wall in 1 of 3 resident rooms in which oxygen was being stored (bedroom #4).</p> <p>Severity: 2    Scope: 1</p>			Y 698	<p>when in doubt so as to avoid any mistakes. The administrator will monitor for compliance.</p> <p>C. 8/13/09</p> <p>Y698</p> <p>A. The oxygen is now secured; we purchased an oxygen cart from Advantage Home Medical. See attachment #4.</p> <p>B. In the future <sup>we</sup> will have an oxygen cart purchased right away. The administrator will monitor for compliance.</p> <p>C. 8/13/09</p>		

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